

Mississippi Secretary of State
125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME MS State Department of Health		CONTACT PERSON Mitchell Adcock	TELEPHONE NUMBER 601-576-7847
ADDRESS PO Box 1700		CITY Jackson	STATE MS
EMAIL ingrid.williams@msdh.ms.gov	SUBMIT DATE 4/15/16	Name or number of rule(s): Title 15: Mississippi Department of Health, Part 2: Epidemiology, Subpart 11: Office of Communicable Diseases, Appendix A, List of Reportable Diseases and Conditions	

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Emergency Rule to add Zika virus as a Class 1B Reportable Condition under the subsection Arboviral Infections. The addition of Zika virus, as an explicitly named reportable condition will facilitate notification of such cases in Mississippi.

Specific legal authority authorizing the promulgation of rule: Miss. Code Ann. § 41-3-15, and §25.43-3.108

List all rules repealed, amended, or suspended by the proposed rule: Rule(s): none

ORAL PROCEEDING:

An oral proceeding is scheduled for this rule on _____ Date: _____ Time: _____
Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

TEMPORARY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
<input checked="" type="checkbox"/> Original filing <input type="checkbox"/> Renewal of effectiveness To be in effect in _____ days Effective date: <input checked="" type="checkbox"/> Immediately upon filing <input type="checkbox"/> Other (specify): _____	Action proposed: <input type="checkbox"/> New rule(s) <input type="checkbox"/> Amendment to existing rule(s) <input type="checkbox"/> Repeal of existing rule(s) <input type="checkbox"/> Adoption by reference Proposed final effective date: <input type="checkbox"/> 30 days after filing <input type="checkbox"/> Other (specify): _____	Date Proposed Rule Filed: _____ Action taken: <input type="checkbox"/> Adopted with no changes in text <input type="checkbox"/> Adopted with changes <input type="checkbox"/> Adopted by reference <input type="checkbox"/> Withdrawn <input type="checkbox"/> Repeal adopted as proposed Effective date: <input type="checkbox"/> 30 days after filing <input type="checkbox"/> Other (specify): _____

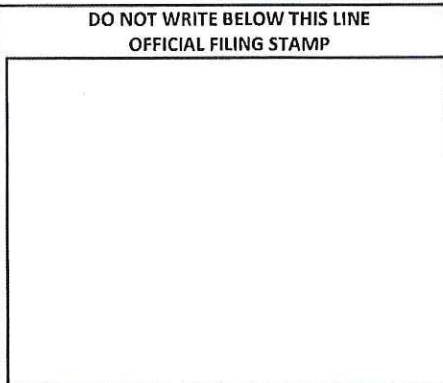
Printed name and Title of person authorized to file rules: Mitchell Adcock, Chief Administrative Officer

Signature of person authorized to file rules: *Mitchell Adcock*



Accepted for filing by

#21884 *[Signature]*



Accepted for filing by



Accepted for filing by

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.